

Section 6 - Continuing Accreditation Policies and Cycle Outline

- A. Accreditation Handbook
 - 1. Accreditation Procedures-**NEW**
 - 2. Standard and Related Options—Original paragraph A 1, modified to align with Section 3
 - 3. Guidelines for Reports—Original paragraph A 2
- B. Accreditation Cycle--**NEW**
Outline of Cycle
- C. Continuing Program Reports-**NEW**
 - 1. Biennial Report.
 - 2. Institutional Summary.
 - 3. Review of Information.
 - 4. Action by Committee on Accreditation.
- D. Continuing Program Accreditation-**NEW**
 - 1. Updated Document
 - 2. Data considered during the program review
 - 3. Review of Information
 - 4. Program Review Guides Site Visit
- E. Continuing Institutional Accreditation
 - 1. Preliminary Report-(Modification of paragraph B 1)
 - 2. Report of Program Document Review-**NEW**
 - 3. Institutional Self Study (Original paragraph B 2)
 - 4. The Site Visit (Original paragraphs C 2-5)
 - a. Collection of Information
 - b. Procedural Safeguards
 - c. Specialized Credential Program Team
 - d. Exit Interview and Report
 - 5. Accreditation Reports, Recommendations and Decisions (Original paragraphs D 1-4)
 - a. Accreditation Team Reports
 - b. Accreditation Team Recommendations
 - c. Accreditation Decisions
 - d. Required Follow-up-**NEW**
 - e. Accreditation with Stipulations
- F. Appeals (Original paragraphs E 1-2)
 - 1. Appeals to the Committee on Accreditation
 - 2. Appeals to the Commission
- G. Concerns about Credential Program Quality (Original paragraph F)

Section 6

Continuing Accreditation Policies and Cycle

The policies in this section govern the Committee's procedural guidelines regarding the continuing accreditation of educator preparation institutions and their programs.

A. Accreditation Handbook

1. **Accreditation Procedures.** The Accreditation Handbook will include the accreditation policies adopted by the Commission and the accreditation procedures adopted by the Committee on Accreditation.
2. **Standards and Related Questions.** The Accreditation Handbook will include the Common Standards as well as questions to consider. The Handbook will also include information about program standards for Options 1 through 3.
3. **Guidelines for Reports.** The Committee on Accreditation will recommend a format for biennial reports, program documents and institutional self-study reports and other materials such as faculty vitae and course syllabi to be submitted by each institution. The Committee will also provide guidelines for organizing exhibits and ways of facilitating the preparation, organization, and presentation of materials that relate to both the Common and Program Standards.

- B. Accreditation Cycle.** Throughout the seven year accreditation cycle, a range of activities take place at both the program sponsor/institution and the Committee on Accreditation. It is the expectation that program sponsors/institutions collect and analyze data annually. Reports are submitted to the Committee on Accreditation at intervals during the seven year cycle. The Accreditation Handbook includes detailed descriptions and samples of each of the activities that takes place during the seven year cycle.

Annual Data Gathering and Analysis: The institution or program sponsor will collect data related to candidate competence on an annual basis.

Continuing (Biennial) Program Reports (2nd, 4th, and 6th years of accreditation cycle): The institution reports the types of findings for each program for the current and prior year to the COA. Each report includes a brief statement of analysis and an action plan based on the analysis. Each institution or program sponsor also submits an institutional summary identifying trends across the programs or critical issues. The COA/CTC staff reviews the biannual reports. If the report is not submitted, is incomplete or is inadequate, CTC staff will contact the institution/program. If the report has been submitted but the data do not demonstrate measures of candidate competence or has deficiencies, COA/CTC staff will request additional information from the institution/program. Upon review of the response from the institution if deficiencies are identified, the COA may request additional information or even schedule a program review or a site visit prior to the scheduled time period.

Accreditation System Structure and Cycle

	Institution or Program Sponsors			Commission on Teacher Credentialing COA and/or Staff will Review
	At the Institution	Submit to CTC/COA		
Year 1	Data Gathering & Analysis			Although no formal report, institution may be completing follow-up from site visit in Year F. Data gathering and analysis is on-going for use during this cycle.
Year 2	Data Gathering & Analysis	Biennial Report (Years 1 & 2)		• Biennial Data Report: if warranted, questions could trigger staff or site visit.
Year 3	Data Gathering & Analysis, prepare program update			No report, data gathering and analysis is on-going at the institution
Year 4	Data Gathering & Analysis	Biennial Report (Years 3 & 4)	Program Review Document	• Biennial Data Report: if warranted, questions could trigger staff or site visit. • Program review teams review each program’s documentation and pose questions for institution. • Program review teams agree on preliminary findings for program standards.
Year 5	Data Gathering & Analysis, prepare self-study		Response to questions on program review	• Program review teams submit preliminary findings and remaining questions or concerns to the COA. • COA determines which, if any program(s) need to be included in the site visit.
Year 6	Data Gathering & Analysis	Biennial Report* (Years 5 & 6)	Common Standards Self-Study	• Site team is provided with preliminary findings from program review teams and all previous documentation (data reports) from this cycle. • Site team visits the institution reviewing all Common Standards and any area identified by the Program Reviews. • Team submits an accreditation report to COA. • COA makes an accreditation decision.
Year 7**	Data Gathering & Analysis		Follow-up to site visit	• COA reviews follow-up, if warranted, asks further questions. Follow up may exceed one year at the discretion of the COA.

* Data related to approved subject matter programs is submitted in Year 6

**After completing the seven year cycle, the institution begins the cycle again

Continuing Program Document Review (4th year of accreditation cycle):

Each program that is offered by an institution/program sponsor must submit an updated version of its approved program document including current syllabi. The update will detail all modifications in the program since its approval. In addition, the candidate assessments, rubrics, and scoring procedures that generated the data gathered over the current year and previous three years must be submitted. In its program document, the institution indicates the standard options it has selected for each credential program in the accreditation review.

Continuing Institutional Accreditation (6th year of accreditation cycle):

An accreditation team visits each institution or program sponsor in the sixth year of the accreditation cycle. Prior to the visit, the institution submits a self-study that responds to the Common Standards. The institution prepares for a site visit that focuses mainly on the Common Standards, but includes students, graduates, and faculty as well as other stakeholders from all programs that are sponsored by the institution. The site review team, composed of 3 to 6 members, focuses on the Common Standards plus any program areas directed to be reviewed by COA as a result of the program review. Within the site visit, each program in operation participates fully in the interview schedule. The COA may add additional members to the team with expertise in the program area(s) to be reviewed at the site visit. The site review team submits a report with program findings and an accreditation recommendation to the COA. It is possible that the site visit team may uncover a program concern or issue not previously identified by the program reviewers. In so doing, the team may recommend a follow up focused program review of the concerns or issues that have arisen. In this event, there would be no accreditation recommendation until after the focused review has been completed. The COA will review the team report prior to making an accreditation decision. When follow-up is required, the COA indicates what follow-up is required and establishes an appropriate timeline.

C. Continuing Program Reports (Biennial Data Report) 2nd, 4th, and 6th years of cycle

- 1. Biennial Report.** Each approved preparation program must collect data related to standard(s) annually and submit a biennial report. The specific requirements of the report are defined in the Accreditation Handbook.
- 2. Institutional Summary.** All program reports from the institution are submitted together with an institutional summary. The institutional summary identifies trends across the programs or critical issues for the program sponsor.
- 3. Review of Information.** The Commission staff reviews the Biennial Data Reports for completeness and sufficiency. Data review procedures are governed by the Accreditation Handbook.
- 4. Action by Committee on Accreditation.** Based on review of the biennial report, the Committee on Accreditation may request additional information or schedule a site visit.

D. Continuing Program Accreditation (Program Document Review) 4th year of cycle

- 1. Updated Document.** The institution or program sponsor will submit an updated version of the most recently approved program document for each of its approved programs to the Commission for review. In addition, current course syllabi, faculty matrix, and criteria for selection of faculty must accompany the document. Specific requirements for the document and examples are contained in the Accreditation Handbook.
- 2. Data considered during the program review.** The Biennial Reports from the current accreditation cycle are included in the program review process. In addition, the selected candidate assessments, rubrics, and scoring procedures that generated the data gathered over the current year and previous three years must be submitted with the updated document.
- 3. Review of Information.** The program review team reviews all information submitted in the program document and Biennial reports for the program. The program review team may raise questions or request additional information from the program sponsor. The program review team considers all information and comes to “preliminary findings” for all program standards as well as recommendations and questions for the site visit. Document review procedures are governed by the Accreditation Handbook.
- 4. Program Review Information Guides Site Visit.** The report from the program review team is forwarded to the Committee on Accreditation. The program review team submits any additional questions or areas of concern to the Committee on Accreditation and Committee on Accreditation will ensure that the site review team investigates the issue(s). The Committee on Accreditation reviews the preliminary program reports and questions/areas of concern to assist in determining the size and composition of the site review team.

E. Continuing Institutional Accreditation (Site Visit) 6th year of cycle

- 1. Preliminary Report.** No less than twelve months before the scheduled site visit, institutional officials submit a Preliminary Report to the Commission. This brief report describes the institutional mission and includes information about institutional demographics, special emphasis programs, and other unique features of the institution. In the Preliminary Report, the institution includes its response to accreditation preconditions established by state laws and the Commission. The Committee on Accreditation uses the Preliminary Report, along with the report from the Program Document Review to determine the type, size and complexity of the programs to be reviewed and the structure, size and expertise of the review team to be selected.
- 2. Report of Program Document Review.** No less than twelve months before the scheduled site visit, the program reviewers will submit the preliminary findings on program

standards and any additional questions or areas of concern to the COA. The program reviewers make a recommendation to COA whether the issue(s) needs to be further reviewed at the site visit. The COA will consider the recommendation and in so doing, will determine the nature of the program review (size and composition of the team) that will take place during the site visit.

- 3. Institutional Self Study.** No fewer than 60 weekdays before the site visit, the institution mails sufficient copies of its Institutional Self-Study Report to the team leader and the Commission staff consultant, who distributes copies of the report to each accreditation site team member. In responding to each applicable standard, the self-study report should emphasize quality considerations, educational rationales, and thoughtful program analyses.

4. The Site Visit

- a. Collection of Information.** The accreditation site visit team gathers information about the quality of the education unit and credential programs at the institution from a variety of sources, including written documents and interviews with institutional administrators, program faculty, enrolled candidates, field supervisors, recent graduates, employers of graduates, and program advisors. Data collection procedures are governed by the Accreditation Handbook.
- b. Procedural Safeguards.** The accreditation site visit team provides ample opportunities during the site review for representatives of the institution (a) to be informed about areas where the standards appear not to be fully satisfied, and (b) to supply additional information pertaining to those standards. These opportunities include, at a minimum, a meeting at approximately mid-visit between representatives of the team and the institution's credential programs, after which additional written information or interviews are utilized by the team in reaching its conclusions.
- c. Specialized Credential Program Team.** If the accreditation site visit team determines that the team lacks sufficient time and/or expertise to make sound recommendations for a particular program, the leader may call for a specialized credential program team to be named to resolve the uncertainty before the accreditation team's final report and recommendation is submitted to the Committee on Accreditation.
- d. Exit Interview and Report.** The accreditation site visit team conducts an exit interview with representatives of the institution, at which time the team presents its findings and recommendations in the form of a draft report to the Committee on Accreditation. If a specialized credential program team has been called for, the accreditation status recommendation is not reported during the exit interview.

5. Accreditation Reports, Recommendations and Decisions

- a. **Accreditation Team Reports.** Accreditation site visit team makes its report and recommendations to the Committee on Accreditation. Accreditation site visit team reports indicate whether each applicable standard is met, include summary findings and a recommendation to the Committee, and may include educational recommendations for consideration by the institution.
- b. **Accreditation Team Recommendations.** An accreditation site visit team recommends Accreditation, or Accreditation with Stipulations, or Denial of Accreditation. The team makes its recommendation based on the overall quality of the education unit and the credential programs at the institution. The team does not recommend separate accreditation decisions for each program. The team may recommend Accreditation but recommend required follow-up for the institution and/or one or more of its programs. Alternatively, a team may recommend Accreditation with Stipulations, which may (if adopted by the Committee) require the institution to fulfill all standards within a specified time not to exceed one year. Stipulations may (if adopted) require the discontinuation of severely deficient programs at the institution.
- c. **Accreditation Decisions.** After reviewing the recommendation of an accreditation team and an appropriate response from the institution (see below), the Committee on Accreditation makes a decision about the accreditation of educator preparation at the institution, including a decision about the status of each credential program. The Committee makes one of three decisions pertaining to each institution: Accreditation, Accreditation with Stipulations, or Denial of Accreditation. The Committee's Annual Accreditation Reports summarize these decisions.
- d. **Required Follow-up.** The Committee on Accreditation may grant full accreditation to an institution, but require follow-up by one or more programs or the institution as a unit. The required follow-up will be documented in reports submitted to the Committee..
- e. **Accreditation with Stipulations.** The Committee on Accreditation allows an institution up to one calendar year to fulfill all standards or to discontinue deficient program(s). The Committee also determines how the institution's response to adopted stipulations is to be reviewed. The Committee may require a second visit for this purpose. Failure to satisfy all stipulations may result in the denial of accreditation to the entire institution. Upon the request of an institution, an additional period to remedy severe deficiencies may be granted by the Committee on Accreditation if the Committee determines that (a) substantial progress has been made and/or (b) special circumstances described by the institution justify a delay.

F. Appeals

- 1. **Appeals to Committee on Accreditation.** Within twenty weekdays after an accreditation visit, the institution may submit evidence to the Committee on

Accreditation that the team demonstrated bias or acted arbitrarily or capriciously or contrary to the policies of this Framework or the procedural guidelines of the Committee. (Information related to the quality of a program or the education unit that was not previously provided to the accreditation team may not be considered by the Committee.) The Committee may use this evidence to make a different decision than was recommended by the team. If the Committee makes such a decision, the leader of the team may file a dissent with the Commission. If the Committee decides that an incorrect judgment was made by a team or cluster, and that the result leaves some doubt about the most appropriate decision to be made, the Committee may assign a new team to visit the institution and provide a recommendation on its accreditation.

- 2. Appeals to the Commission.** Pursuant to Education Code Section 44374-e, an institution has the right to appeal to the Commission a decision by the Committee on Accreditation to deny accreditation or accredit with stipulations. Such an appeal must be based on evidence that accreditation procedures by the team or decisions by the Committee were arbitrary, capricious, unfair, or contrary to the policies in this Framework or the procedural guidelines of the Committee. Information related to the quality of a program or the education unit that was not previously provided to the accreditation team may not be considered by the Commission. The Commission resolves each appeal pursuant to Education Code Section 44372-f.

G. Concerns about Credential Program Quality. When one or more complaints about a credential program indicate that the quality of the program may be in serious jeopardy, the Executive Director of the Commission may investigate the basis for the concerns, provide technical assistance to the institution, or refer the concerns to the Committee on Accreditation for consideration of possible action.